

INSPECTION SUMMARY REPORT

NAME OF FOOD FACILITY: DATE OF INSPECTION: ADDRESS: **FACILITY IS IN COMPLIANCE WITH HEALTH & SAFETY CODE** No corrective action required Corrective action required in the following areas: FOOD HANDLING EQUIPMENT SANITATION ☐ FOOD TEMPERATURE EQUIPMENT MAINTENANCE ☐ FOOD STORAGE ☐ FACILITY SANITATION ☐ FOOD SOURCE & LABELING ☐ FACILITY MAINTENANCE ☐ WATER SUPPLY & TEMPERATURE ☐ RESTROOMS ☐ UTENSIL WASHING & SANITIZING □ PEST CONTROL ☐ EMPLOYEE PRACTICES ☐ WASTE MANAGEMENT DATE OF REINSPECTION: COMMENTS: A COMPLETE INSPECTION REPORT CAN BE VIEWED AT THIS FACILITY AND IS AVAILABLE AT THE HEALTH DEPARTMENT EL REPORTE COMPLETO DE SALUD DE ESTE LOCAL PUEDE SER REVISADO EN ESTE ESTABLECIMENTO Y ESTÁ DISPONIBLE EN EL DEPARTAMENTO DE SALUD Para información llame al (562) 570-4132

លិទ្ធផលនៃការពិនិត្យទាំងមូល សម្រាប់សុខភាព អ្នកអាចស្ទើរកបាន នៅកន្លែងនេះ នីងកន្លែង ក្រសួងបម្រើសុខភាពសាធារណៈ សម្រាប់ពត៌មាន សូមទូរសព្វំ (៥៦២) ៥៧០-៤១៣២

TAMPERING OR REMOVAL OF THIS REPORT IS A VIOLATION OF L.B.M.C. 8.45.070

Department of Health & Human Services 2525 Grand Ave. Long Beach, CA 90815

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For information call (562) 570-4132